11895<u>05</u>

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB	APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden

Estimated average burden hours per response 16.00

SEC US	SE ONLY
Prefix	Serial
DATE R	ECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate	e change.)								
10% Convertible Promissory Notes and Preferred Stock Purchase Warrants Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 500 Type of Filing: ☐ New Filing ☑ Amendment	6 Section 4(6) Section 4(6) Section								
A. BASIC IDENTIFICATION DATA									
1. Enter the information requested about the issuer	ADR 21 7008								
Name of Issuer (Check if this is an amendment and name has changed, and indicate ch	ange.)								
EXIT41, Inc.	Washington, DC								
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Arc. Core)								
Three Dundee Park, Andover, MA 01810	978-749-9033								
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Nu								
(if different from Executive Offices)	CED								
PROCES									
Brief Description of Business To provide software/hardware systems APR 2 8 20									
	08046244								
Type of Business Organization ☐ corporation ☐ limited partnership, already for R									
 □ corporation □ limited partnership, already for the MOON K □ business trust □ limited partnership, to be formed 	EUIERS □ other (please specify):								
March V									
1V.	ear ⊠ Actual □ Estimated								
1.1	8								
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; CN for Canada; FN for other foreign jurisdiction)	D E								
<u></u>	D E								
GENERAL INSTRUCTIONS									
Federal:	1.1. D. G 4/() 17 OPD 330 501								
Who Must File: All issuers making an offering of securities in reliance on an exemption under R seq. or 15 U.S.C. 77d(6).	egulation D or Section 4(6), 17 CFR 230.501 et								
When To File: A notice must be filed no later than 15 days after the first sale of securities in the	offering. A notice is deemed filed with the U.S.								
Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC									
address after the date on which it is due, on the date it was mailed by United States registered or cer									
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D									
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must	be manually signed. Any copies not manually								
signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need on	ly report the name of the issuer and offering any								
changes thereto, the information requested in Part C, and any material changes from the information									
and the Appendix need not be filed with the SEC.									
Filing Fee: There is no federal filing fee.									
-State:									
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate noti	ce with the Securities Administrator in each state								
where sales are to be, or have been made. If a state requires the payment of a fee as a precondi	tion to the claim for the exemption, a fee in the								
proper amount shall accompany this form. This notice shall be filed in the appropriate states in									
notice constitutes a part of this notice and must be completed.									
ATTENTION									
Failure to file notice in the appropriate states will not result in a loss of the federal exemption									
If federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.									

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

S.C.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities
of the issuer;
Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last Name first, if individual)
Born, Rob
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Thomas Weisel Venture Partners, L.P., 275 Middlefield Road, Menlo Park, CA 94025
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Greene, I. Robert
Business or Residence Address (Number and Street, City, State, Zip Code)
970 Lake Avenue, Greenwich, CT 06831
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
-Humphrey, John W.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Humphrey Enterprises LLC, One Beacon Street, Suite 2320, Boston, MA 02108-3106
Check Box(es) that Apply: Promoter 🗵 Beneficial Owner 🗆 Executive Officer 🗆 Director 🗅 General and/or Managing Partner
Check Box(es) that Apply. In Promoter La Beneficial Owner In Executive Officer In Director In General and/or Managing Farther
Full Name (Last Name first, if individual)
Humphrey Enterprises, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
One Beacon Street, Suite 2320, Boston, MA 02108-3106
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
-Jonas, Stephen
Business or Residence Address (Number and Street, City, State, Zip Code)
25'Beaver Place, Boston, MA 02108
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
r Gagnon, Joseph L.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o EXIT41, Inc., 3 Dundee Park, Andover, MA 01810
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
-Ferrari, Mark
Business or Residence Address (Number and Street, City, State, Zip Code)
Fidelity Investors III Limited Partnership, 82 Devonshire Street, Mail Zone F7B, Boston, MA 02109
recently investors in Dianted randicismp, or Developme Scient from Lone 1/13, Boston, MA 02107

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA
-2. Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
"Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last Name first, if individual) Fidelity Investors III Limited Partnership
Business or Residence Address (Number and Street, City, State, Zip Code)
82 Devonshire Street, Mail Zone F7B, Boston, MA 02109
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
· Full Name (Last name first, if individual)
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82 Devonshire Street, Mail Zone F7B, Boston, MA 02109
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last Name first, if individual)
Thomas Weisel Venture Partners, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code) 275 Middlefield Road, Menlo Park, CA 94025
Chéck Box(es) that Apply: □ Promoter ☑ Beneficial Owner □ Executive Officer □ Director □ General and/or Managing Partner
Full Name (Last Name first, if individual)
Thomas Weisel Venture Partners LLC
Business or Residence Address (Number and Street, City, State, Zip Code) 275 Middlefield Road, Menlo Park, CA 94025
Check Box(es) that Apply:
Full Name (Last Name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
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Full Name (Last Name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:
Full Name (Last Name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

99-a L					B. IN	FORMAT	TION ABO	OUT OF	FERING					
													Yes	No
٠ از	Has the is	suer sold,	or does th	e issuer in	tend to se	ll, to non-a	ccredited	investors	in this off	ering?	•••••			X
~. `						dix, Colun		-						
* 2. ·	What is th	ne minimu	ım investn	nent that w	ill be acce	epted from	any indiv	idual?		************			\$	N/A
	Divide	. 00				.1							Yes ⊠	No □
3. ,	Does the	offering pe	ermit joint	ownershi	p of a sing	le unit?	•••••	••••••	*************	***************************************			ı	ш
-4.	Enter the	informatie	on request	ed for eac	h person	who has b	een or wil	ll be paid	or given,	directly of	or indirect	ly, any		
•	commissi	on or sim	iilar remu	neration f	or solicita	ition of pi	archasers	in connec	ction with	sales of	securities	in the	NO	т
• •	_	-			-	erson or a			-					CABLE
						or dealer. rth the info					ed are ass	ociated		
	persons of	such a of	okei oi de	alei, you i	nay set to	ini nic nin	omation i	or urar ore	okci oi uca	aici oiliy.				
Full N	ame (Last i	name first	, if individ	ual)										
• • • •														
Busine	ess or Resid	ience Add	ress (Num	ber and S	treet, City	, State, Zip	Code)							
Name	of Associa	ted Broke	r or Deale	,										
,i vairie	01 71330014	ica Broke	or Beare	•										
States	in Which F	erson Lis	ted Has So	olicited or	Intends to	Solicit Pu	rchasers							
	ck "All Star												□ All Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [MT]	[IN] [NE]	[IA] [NV]	(KS) [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Last	name first	, if individ	ual)										
Busine	ess or Resid	lence Add	ress (Num	ber and Si	treet. City	State Zir	Code)							
						,								
Name	of Associa	ted Broke	r or Deale	1										
						a tran								
	in Which F ck "All Stat												☐ All Sta	ates
	[AK]								[FL]	[GA]	[НП]	[ID]		
(ìL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
-[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Last i	name first.	. if individ	ual)										··· ··
<u>:</u>	`		, 	, 										
Busine	ess or Resid	lence Add	ress (Num	ber and S	treet, City	, State, Zip	Code)							
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Name	of Associa	ted Broke	r or Deale	r										
States	in Which F	erson Lis	ted Has So	olicited or	Intends to	Solicit Pu	rchasers							
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	r1	r - 1	r7	r1	1		F 3			. ,				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this

	box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	l		
	Type of Security	Aggregate Offering Price	Am	ount Already Sold
4		\$ 4,200,000	\$	3,800,000
į;	Equity	\$	\$ <u></u>	-0-
	Convertible Securities (including warrants)	\$	\$	-0
	Partnership Interests	\$	\$	-0-
	Other (Specify)	\$ <u>-</u> 0-	\$	-0-
Tail		\$ <u>4,200,000</u>	\$	3,800,000
t	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate he number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	:		gregate Dollar Amount of Purchases
	Accredited Investors	5	\$	3,800,000
٠.	Non-Accredited Investors	-0-	\$	-0-
-	Total (for filings under Rule 504 only)		\$	
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C Question 1. Type of Offering		PLICAB.	LE Ilar Amount Sold
2	Rule 505		\$	
;	Regulation A		<u></u>	· · · · · · · · · · · · · · · · · · ·
	Rule 504		s	
	Total		\$	
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	ASSUM	ES ENTII ING IS S	
	Transfer Agent's Fees		\$	-0- -0-
	Printing and Engraving Costs		\$	30,000
3.	Accounting Fees		\$	-0-
	Engineering Fees		\$	<u>-0-</u> -0-
-	Sales commission (specify finders' fees separately)		\$	<u>-0-</u>
	' Total	X	\$	30,000

,b.	Enter the difference between the aggregate offering price given in response to Part C - Que and total expenses furnished in response to Part C Question 4.a. This difference is the "gross proceeds to the issuer."	adjust	ted	\$_		4,1	70,000
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed each of the purposes shown. If the amount for any purpose is not known, furnish an estimate the box to the left of the estimate. The total of the payments listed must equal the proceeds to the issuer set forth in response to Part C — Question 4.b above.	nate ar	nd chec	ck			
			Offic	ayments to cers, Directors & Affiliates			Payments to Others
	Salaries and fees			-0-		\$	-0
	Purchase of real estate		\$	-0-		\$	-0
-	Purchase, rental or leasing and installation of machinery and equipment		s	-0-		\$	-0
;,	Construction or leasing of plant buildings and facilities		\$	-0-		s	-0
£	Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		s	-0-		s_	-0
	Repayment of indebtedness		S	-0-		\$	-0
	Working capital		s	-0-	X	\$	4,170,000
	Other (specify):		\$	-0-		\$	-0
	Column Totals		s	-0-		\$	
	Total Payments Listed (column totals added)			⊠ \$ <u>4</u> ,	170 <u>.</u> 0	<u>)00</u>	
	D. FEDERAL SIGNATURE		-				
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchan formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2)	ge Co	mmiss	ion, upon writte			
l:	ssuer (Print or Type)	Da	te				
F	EXIT41, Inc.			A	pril	14,	2008
١	Plame of Signer (Print or Type)						
Ι.	osanh I. Caanan Prosident and Chief Evecutive Officer						

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
Is any party described in 17 CFR disqualification provisions of such		—————————————————————————————————————	
1	See Appendix, Column 5, for state-r	response.	
2. The undersigned issuer hereby un CFR 239.500) at such times as rec		any state in which this notice is filed, a notice on Form	i D (1
3. The undersigned-issuer-hereby un offerees.*	ndertakes to furnish to the state-administrators, u	upon-written request, information-furnished by the is:	suer t e
Offering Exemption (ULOE) of the		that-must be satisfied to be entitled to the Uniform L nds-that-the issuer claiming the availability of this exer	
-hea	deleted pursuant to the National Securities Market and knows the contents to be true and has duly cau	et Improvement Act of 1996. used this notice to be signed on its behalf by the under	signec
Issuer (Print or Type) EXIT41, Inc.	Signature MM Amm	Date April/4/, 2008	
Name of Signer (Print or Type) Joseph L. Gagnon	Title of Signer (Print or Type) President and Chief Executive O	Officer	
1	· · · · · · · · · · · · · · · · · · ·		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

					APPENDIX						
1		2		5							
	non-acc invest St	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No	Convertible Notes and Preferred Warrants	Number of Accredited Investors	Number of Non-Amount Amount Amount						
AL											
AK											
AZ											
AR											
CA											
CO											
CT		X	\$4,200,000	1	\$44,536.35	0					
DE											
DC											
FL		i				1					
GA											
- HI		:									
ID											
IL											
IN											
· IA											
KS											
KY	ļ										
LA											
. ME											
MD											
MA		X	\$4,200,000	4	\$3,755,463.65	0					
MI											
MN											
-MS											
. MO											
MT											

-				F	APPENDIX								
1		2	3		(4			5				
									ification State				
	Intend	to sell to	Type of security										
	1	credited	and aggregate		m				ach				
		tors in ate	offering price offered in state			vestor and		explan waiver	ation of granted)				
	State offered in state amount purchased in State (Part B-Item 1) (Part C-Item 2)												
State	Yes	No	Convertible Notes and Preferred Warrants	Number of Accredited Investors	Number of Accredited Amount Secredited Amount								
NE					···								
NV													
NH													
NJ													
NM								<u> </u>					
NY					· <u> </u>								
NC		<u> </u>											
ND													
ОН									ļ				
OK	 	<u> </u>											
OR	-												
PA RI							- 11.01-	<u> </u>					
SC					,								
- SD								<u> </u>					
TN													
TX													
- UT													
VT													
VA						,							
WA													
. WV													
- WI													
WY													
PR													

END

t:\a.- i\exit41\bridge financing (sept. 07)\april '08 closing\blue sky\amended form d.doc